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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Donna Edwards										
	(b) Address (number and street) 8904 Glen Lane	☐ Check if address changed				Candidate's FEC Identification Number H6MD04183					
	(c) City, State, and ZIP Code					3. Is This	Nev			Amended	
	Fort Washington	MD 20744				Statement	(N)	OR	ш	(A)	
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate	1				
	DEMOCRATIC PARTY	House			MD	04					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) DONNA EDWARDS FOR CONGRESS											
	(b) Address (number and street) P.O. Box 441153										
	(c) City, State, and ZIP Code										
	FORT WASHINGTON				MD	20749					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)											
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
(a) Name of Committee (in full)											
(b) Address (number and street)											
(c) City, State, and ZIP Code											
	I certify that I have exa	mined this Stat	tement and to	the best of	my knowledge a	and belief it is tru	e, correct a	and comple	ete.		
Signature of Candidate						Date					
D_{i}	onna Edwards	[Electronically Filed]				04/24/2013					
				-							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)